

Application for search & certified copy of **DEATH RECORD**  
**WE HAVE BOONE COUNTY DEATHS ONLY!!!**

PLEASE COMPLETE **ALL ITEMS** BELOW

In accordance with **Indiana Code 16-37-1-7**, requests for death cert.  
must include the information below. A permanent record of this request

FULL NAME AT DEATH \_\_\_\_\_

HOW ARE YOU RELATED TO THE ABOVE PERSON? \_\_\_\_\_

PLACE OF DEATH (City) \_\_\_\_\_ (County) \_\_\_\_\_

DATE OF DEATH \_\_\_\_\_

FULL NAME OF FATHER (IF KNOWN) \_\_\_\_\_

FULL **MAIDEN** NAME OF MOTHER (IF KNOWN) \_\_\_\_\_

WHY DO YOU NEED THIS RECORD? \_\_\_\_\_

HOW MANY COPIES DO YOU WANT? \_\_\_\_\_ TOTAL FEE \$ \_\_\_\_\_

YOUR

SIGNATURE \_\_\_\_\_

YOUR NAME (PLEASE PRINT) \_\_\_\_\_ PHONE \_\_\_\_\_

NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

—  
TODAY'S DATE \_\_\_\_\_ TOTAL FEE \$ \_\_\_\_\_

**FOR OFFICE USE ONLY:**

BK. \_\_\_\_\_ PG. \_\_\_\_\_ CERT. \_\_\_\_\_

Death Cert. File Date: \_\_\_\_\_

Date Issued \_\_\_\_\_ By \_\_\_\_\_

ID: \_\_\_\_\_

**VITAL RECORD FEES:**

- |   |  |
|---|--|
| 1. GENEALOGY SEARCH                     | \$5.00 (per name)                                |
| 2. CERTIFIED BIRTH CERTIFICATE          | \$10.00 (per certificate)                        |
| 3. CERTIFIED DEATH CERTIFICATE          | \$10.00 for the first, and \$6.00 per additional |
| 4. Un-CERTIFIED BIRTH/DEATH CERTIFICATE | \$6.00 (per certificate)                         |

5. AMENDMENTS FOR BIRTH CERTIFICATE

\$6.00 (per amendment)